

FOR INSTRUCTIONS, SEE BACK OF FORM

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## DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

IMPORTANT: Indicate type of committee you are reporting for: ☐ 1 ☐ 2 ☐ 3 ☒ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate  
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee  
(8) Support State of Candidates

### CANDIDATE COMMITTEES ONLY:

Candidate Name

Craig Kelley

Political Party

Office Sought

Mayor Knoxville

District (if Senate or House)

SIGNATURE OF TREASURER (or person filing this report)

Richard J. Imousek

641-842-3711  
TELEPHONE

11/30/03  
DATE SIGNED

FORM  
DR-2

(Rev. 07/2003)

DISCLOSURE  
REPORT

### For Office Use Only

Comm. # \_\_\_\_\_  
Logged In \_\_\_\_\_  
Scanned \_\_\_\_\_  
Computer \_\_\_\_\_  
Audited \_\_\_\_\_

Late filed reports are subject to possible civil and criminal penalties.

### SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Dec 1, 2003 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.  
(report date)

Indicate one ☐ 1 ☐ 2

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

Nov 4, 2003

County & Local Committees, enter County in  
which Election is held

Marion

## STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 848<sup>00</sup>

### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

175<sup>00</sup>

Schedule F: Loans Received total (Attach Schedule F)

-

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 1023<sup>00</sup>

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1023<sup>00</sup>

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

0

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

0

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

2000<sup>00</sup>

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

0

### CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/18/03	ID# CK# 96	Staples Ankeny Ia 906 E 1st Ankeny Ia 50021	Paper for mailers Cardboard	\$ 9 54
10/22/03	ID# CK# 97	Knoxville Chamber 309 E Main St Knoxville Ia 50138	Copying for mailers used our paper	25 00
10/21/03	ID# CK# 98	US Post office Knoxville	mail post cards 1000 stamps @ .23	230 00
10/22/03	ID# CK# 99	Knoxville Chamber 309 E Main St Knoxville Ia 50138	copying for mailers used our paper	3 00
10/22/03	ID# CK# 100	Sigler Companies 413 Northwestern Ames Ia 50010-0887	signs Kelley for Mayor 200 ea	423 00
10/30/03	ID# CK# 101	Quality Printers 116 E Robinson Knoxville Ia 50138	signs small 150 ea	74 00
11/7/03	ID# CK# 102	Journal Express 122 E Robinson Knoxville Ia 50138	Thank you ad in Reminder	96 00
11/7/03	ID# CK# 103	Hometown News 301 E Main Knoxville Ia 50138	thank you ad in Shopper	63 00
SUB-TOTAL				\$ 956 54
TOTAL (if last page of this schedule)				\$

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Kelley for Mayor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/19/03	ID# CK# 104	US Postoffice Knoxville la 50138	roll of .37 strips	\$ 37 <sup>00</sup>
11/19/03	ID# CK# 105	Wal Mart Knoxville la 50138	ream paper 2 boxes envelopes 1 cart of ink for correspondence and thank yous	18 <sup>41</sup>
11/29/03	ID# CK# 106	Habitat for Humanity Knoxville la	Donation of balance to charity	40 <sup>29</sup>
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 95 <sup>76</sup>
TOTAL (if last page of this schedule)				\$ 1023 <sup>00</sup>

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(i).)

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(for Schedule B)

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/22/03	ID# CK#	Alan Furney 1707 Newbld Dr Knoxville Iowa 50138		\$ 50 <sup>00</sup>	<input type="checkbox"/>
10/23/03	ID# CK#	Brad Crossett 814 west Washington Knoxville Iowa 50138		50 <sup>00</sup>	<input type="checkbox"/>
10/31/03	ID# CK#	Scott Evans 1010 E. Montgomery Knoxville Iowa 50138		25 <sup>00</sup>	<input type="checkbox"/>
11/4/03	ID# CK#	Craig Agan 1902 W. Grandview Drive Knoxville Ia 50138		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 175 <sup>00</sup>	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

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SCHEDULE  
E  
(Rev. 06/97)

IN KIND  
CONTRIBUTIONS

☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/21/03	KNIA / KRLS	Candidate	Radio ads	\$ 2000.00	<input type="checkbox"/>
	50 ea 60 sec ads / AM 74 ea 30 sec ads / AM				<input type="checkbox"/>
	50 ea 60 sec ads / FM 74 ea 30 sec ads / FM				<input type="checkbox"/>
	Candidate had pre-purchased ads and trade to campaign				<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (if last  
page of this  
schedule) \$

2000.00

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_  
(for Schedule E)